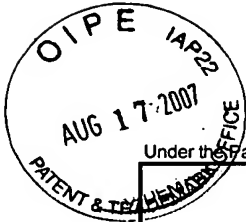


08-20-07

A-F
JFW

PTO/SB/21 (04-07)

Approved for use through 09/30/2007. OMB 0651-0034

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/531,881-Conf. #5797
		Filing Date	May 15, 2006
		First Named Inventor	Hilmar Bischoff
		Art Unit	1625
		Examiner Name	N. Rahmani
Total Number of Pages in This Submission	22	Attorney Docket Number	LeA 36 036 [67002(54716)]

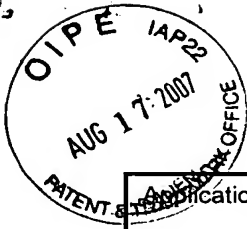
ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	BAYER PHARMACEUTICALS CORPORATION		
Signature	<i>William F. Gray</i>		
Printed name	William F. Gray, Ph.D., Esq.		
Date	August 17, 2007	Reg. No.	31,018

By: *Nicholas J. DiCeglie, Jr.*Nicholas J. DiCeglie, Jr. (Reg. No.: 51,615)
Attorney/Agent for the Applicants



Application No. (if known): 10/531,881

Attorney Docket No.: LeA 36 036
[67002(54716)]

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EM 155278627 US in an envelope addressed to:

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on August 17, 2007
Date

Signature

Deborah Clark

Typed or printed name of person signing Certificate

Registration Number, if applicable

(617) 439-4444
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Amendment After Final Action Under 37 C.F.R. 1.116 (18 pages)
Amendment Transmittal (1 page)
Transmittal (1 page)
Fee Transmittal Form
Charge \$120.00 to deposit account 04-1105